

Health Education Collaborative Newsletter

A message from the CEO



Bruce Greaves
CEO/Director

Welcome to issue 6

As we make our way through the winter solstice another month of uncertainties goes by. We were almost on top of this pandemic, however as you can see it only takes a few noncompliant people and groups ignoring the public health advice to change the course action required to contain the virus.

This setback has had impacts across the board and no doubt has increased public frustration as we were hoping to start returning to some normality.

With all the bad things that we are seeing around the world, the birth of my first grandchild has reinvigorated my mission of providing best practice knowledge and skills training for health care professionals to make the world a better and safer place for the next generation.

We are currently working on new courses and negotiating new exciting collaborative partnerships, which we hope we can make available later this year or early next year. Our model of working with health professional peak bodies ensures the highest standard and level of certification and course review. Who do you want your certificate endorsed by? I think the answer is easy, "the peak body".

Be safe and please forward this email to your colleagues, especially to those who would benefit from ECG Basics and Fracture Management to further their scope of practice and professional development.

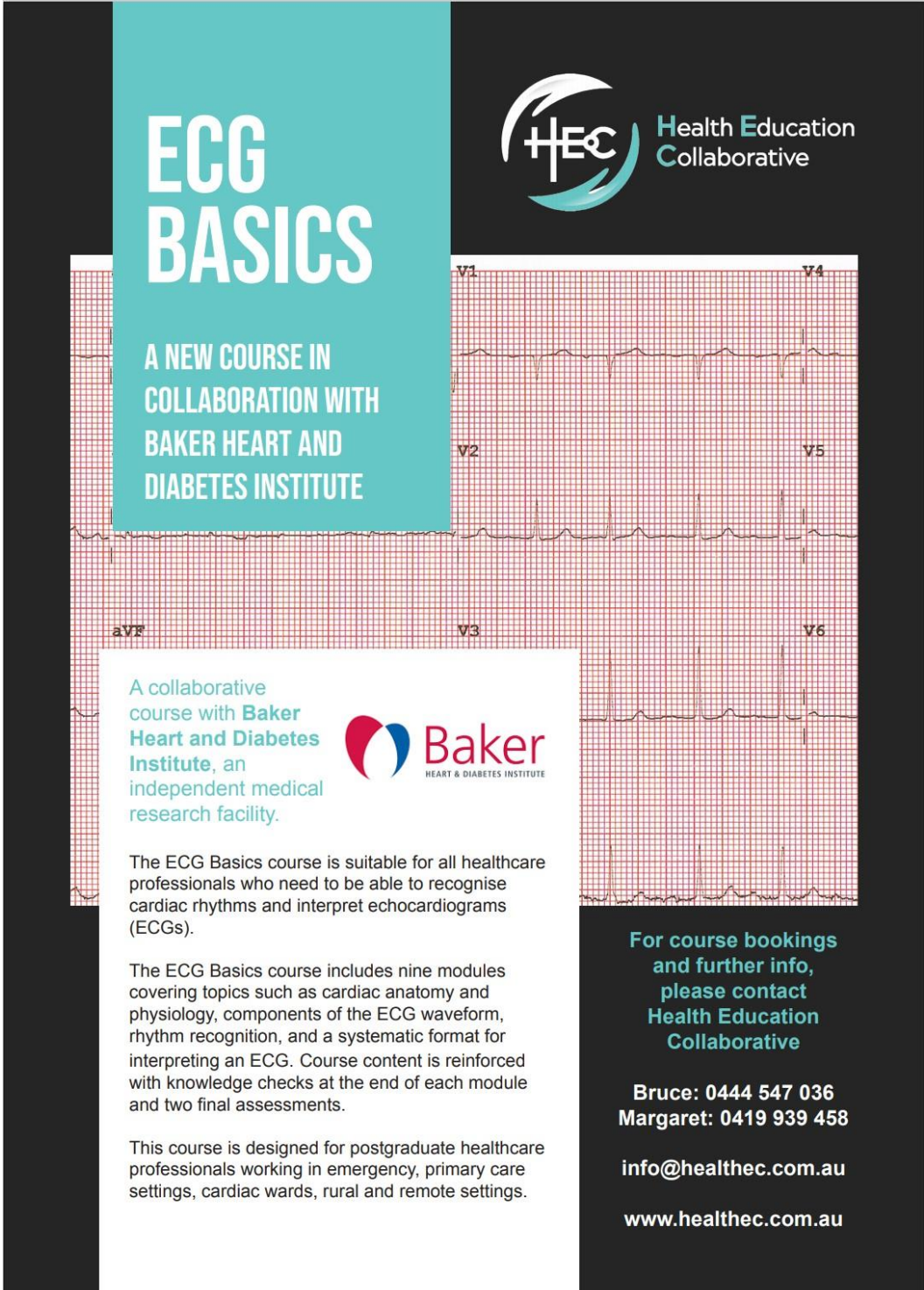
We are a clinician owned and operated collaborative health training organisation.

Bruce Greaves CEO/Director
Health Education Collaborative

Course Development

New course release

Our collaborative partnership ECG and Fracture Management Courses are now available and we are offering a discounted introductory rate for a limited time.



The poster features a background of a 12-lead ECG tracing on a pink grid. The leads are labeled: V1, V2, V3, V4, V5, V6, aVR, and aVL. The title 'ECG BASICS' is prominently displayed in large white letters on a teal background. Below the title, it states 'A NEW COURSE IN COLLABORATION WITH BAKER HEART AND DIABETES INSTITUTE'. The Health Education Collaborative (HEC) logo is in the top right corner. The Baker Heart and Diabetes Institute logo is in the bottom left. Text on the poster describes the course as suitable for all healthcare professionals, covering cardiac anatomy, physiology, ECG waveform, rhythm recognition, and a systematic format for interpreting an ECG. It also mentions that the course includes nine modules, knowledge checks, and two final assessments. Contact information for course bookings is provided in the bottom right corner.

ECG BASICS

A NEW COURSE IN
COLLABORATION WITH
BAKER HEART AND
DIABETES INSTITUTE

A collaborative
course with **Baker
Heart and Diabetes
Institute**, an
independent medical
research facility.

Baker
HEART & DIABETES INSTITUTE

The ECG Basics course is suitable for all healthcare professionals who need to be able to recognise cardiac rhythms and interpret echocardiograms (ECGs).

The ECG Basics course includes nine modules covering topics such as cardiac anatomy and physiology, components of the ECG waveform, rhythm recognition, and a systematic format for interpreting an ECG. Course content is reinforced with knowledge checks at the end of each module and two final assessments.

This course is designed for postgraduate healthcare professionals working in emergency, primary care settings, cardiac wards, rural and remote settings.

**For course bookings
and further info,
please contact
Health Education
Collaborative**

**Bruce: 0444 547 036
Margaret: 0419 939 458**

info@healthec.com.au

www.healthec.com.au

FRACTURE MANAGEMENT



Health Education
Collaborative

A NEW COURSE IN COLLABORATION
WITH THE AUSTRALIAN
ORTHOPAEDIC ASSOCIATION

A collaborative course
with the **Australian
Orthopaedic Association**,
the peak professional body
for orthopaedic surgery in
Australia.



AOA
AUSTRALIAN
ORTHOPAEDIC
ASSOCIATION

The Fracture Management course
covers the essentials of managing
fractures in primary care.

The course is delivered in a
blended format incorporating online and face-to-face
learning. Topics covered include basic anatomy,
physiology of the musculoskeletal system, different
types of fractures and associated complications,
emergency management, investigations, diagnosis
and referral, splinting, casting and post-application
management.

The course is designed for postgraduate healthcare
professionals working in health facilities such as
emergency departments, primary care, casting clinics,
specialist rooms and rural and remote settings.

**For course bookings
and further info,
please contact
Health Education
Collaborative**

**Bruce: 0444 547 036
Margaret: 0419 939 458**

info@healthec.com.au

www.healthec.com.au

For further information and to enroll visit our website
healthec.com.au

We are pleased to advise that the first face to face session will take place Melbourne

 <p>FRACTURE MANAGEMENT</p> <p>A NEW COURSE IN COLLABORATION WITH THE AUSTRALIAN ORTHOPAEDIC ASSOCIATION</p> <p>A collaborative course with the Australian Orthopaedic Association, the peak professional body for orthopaedic surgery in Australia.</p> <p>The Fracture Management course covers the essentials of managing fractures in primary care.</p> <p>The course is delivered in a blended format incorporating online and face-to-face learning. Topics covered include basic anatomy, physiology of the musculoskeletal system, different types of fractures and associated complications, emergency management, investigations, diagnosis and referral, splinting, casting and post-application management.</p> <p>The course is designed for postgraduate healthcare professionals working in health facilities such as emergency departments, primary care, casting clinics, specialist rooms and rural and remote settings.</p> <p>AOA AUSTRALIAN ORTHOPAEDIC ASSOCIATION</p> <p>For course bookings and further info, please contact Health Education Collaborative</p> <p>Bruce: 0444 547 036 Margaret: 0419 939 458</p> <p>info@healthec.com.au https://healthec.com.au/</p>	<p>Venue</p> <p> Holmesglen PRIVATE HOSPITAL</p> <p>490 South Road Moorabbin Vic 3189</p> <p>Date:</p> <p>Wednesday, 5 August 2020</p> <p>Time:</p> <p>08.30am to 5pm</p>
---	--

Be the first in Australia to attain this endorsed fracture management certificate for immobilisation splinting and casting to add to your scope of practice.
A discounted course fee is available for a limited time.

Fracture management course dates will be added as restrictions lift. Please contact us to enquire about proposed courses in your area/state later in the year or hosting a course at your facility. The online component can be started and completed at any time, then simply select the skills training session that suits as they become available in your state.

Clinical Update

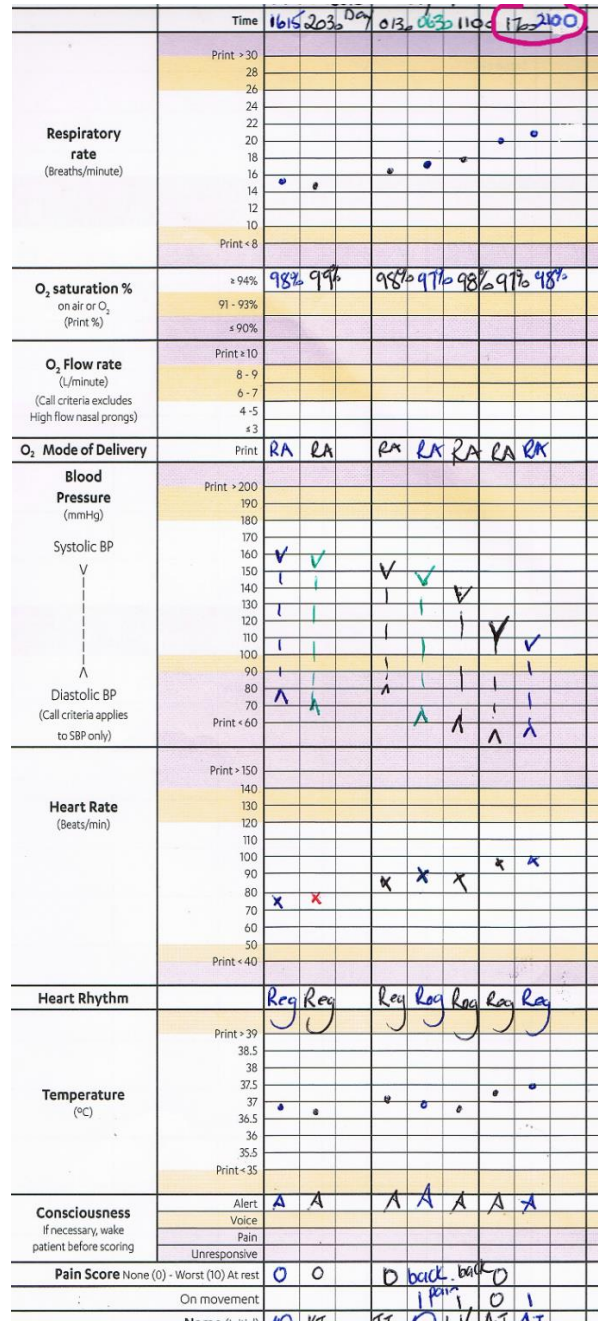


Marg Vilella
Director/ Education
Director

Clinical Question

Last month's clinical question answer.

Last month I asked a few questions about this observation chart.



What do you think about the obs on this obs chart? It is clear from looking at this chart the patient's BP is going down and the RR and HR are going up.

Are any of these observations concerning? Yes, the RR, BP and increasing HR.

Do any of these observations meet clinical review criteria? No.

Do any of these observations fall within MET criteria? No.

What do you think about the frequency of these observations? (take note of the times circled in pink) The BP taken at 1700 is quite a bit lower than the one taken at 1100. The HR and RR are also increasing. The obs are not repeated for 4hrs, which is too long.

When would you review this patient again? It would have been appropriate to retake these observations at 1730. This patient would need to have frequent observations until the patient's BP improved, more importantly a timely review.

What would be your course of action? Even though this patient does not meet CRC or MET call criteria the patient should be reviewed by the treating doctor with appropriate intervention implemented, for example, an IV fluid bolus.

It is important to look at the **trends** of the observations and what are normal parameters for this patient.

Remember, it important to recognise deterioration early and act on it!

If you would like more clinical assessment scenarios, you may like to enroll in the Clinical Assessment course. [Click here](#) for the link to the course.

Clinical Question

Heart failure (HF) is estimated to affect about 480000 people in Australia. It is more common in the elderly and there is higher incidence in Indigenous Australians compared with non-Indigenous Australian. Patient with HF experience repeated hospitalisations and GP presentations.

HF occurs when there is an abnormality of cardiac structures or function that impairs the ability of the heart to fill with blood at normal pressure or eject blood sufficiently resulting in dyspnoea.

Given that this is a common presentation, it important to understand HF. Do you know how HF is classified?

In the Chat Room



This month we interview **Belinda Balhatchet, Senior Research and Education Officer** at the **Australian Orthopaedic Association**.



HEC: What does your role involve as the Senior Research and Education Officer for the Australian Orthopaedic Association?

Belinda: I have been working at AOA for almost five years. I currently work part-time so that I can complete my PhD. My role is varied and covers a lot of different activities. The main part of my role is looking after the various research activities of the Association. I also cover aspects of trainee selection, CPD, policy development, graphic design and a range of other bits and pieces. I am never bored!

HEC: How has the Covid-19 virus impacted on your role?

Belinda: The main change has been moving from our office in Sydney to working from home full time. COVID also had a significant impact on the orthopaedic surgery workforce in Australia, so I have been assisting in working out some of those issues in addition to my regular work.

HEC: What is the most challenging part of your job?

Belinda: My job is busy and covers many different activities within the Association, which means that it can be a challenge to keep up with everything. But I enjoy being busy and the variety keeps things interesting. I am fortunate to work with a wonderfully supportive team who all pitch in to help each other out.

HEC: You have been involved with the development of the Fracture Management Course and the critical review process that it went through, how important is it to have the course reviewed at a high level by the peak body?

Belinda: AOA is the peak professional body for orthopaedic surgery in Australia and is committed to ensuring the highest possible standard of orthopaedic care for every patient. Anyone can set up and deliver a short course in healthcare, and the quality can vary significantly. Having a course reviewed and endorsed by the relevant peak body gives students confidence that the content is of a high standard and is being delivered by appropriately qualified trainers.

HEC: What drove the AOA to become involved with a course for nurses, allied health, general practice and non-specialists in fracture management with the emphasis on splinting and casting?

Belinda: We had received a number of requests from our members to get involved in improving the standards of casting in Australia. As improper casting can have a detrimental impact on outcomes for orthopaedic patients. Our surgeons have a vested interest in ensuring that health professionals involved in casting are correctly trained. As there is no longer a recognised formal qualification in Australia for casting, we decided that short courses were the most appropriate way to provide this service for our members.

HEC: Why is ongoing education so important in orthopaedic training?

Belinda: AOA strongly believes in the importance of maintaining, enhancing or developing skills and knowledge across the entirety of a health professional's career. Continuous learning and ongoing education help to maintain the highest possible standard of practice and therefore ensure the highest standard of care for patients. We work hard to promote lifelong learning and reflection in all aspects of surgical care so that our patients can achieve the best possible outcomes.

Thanks Belinda. What a great job supporting the ongoing education and development of our surgeons which ultimately benefits the community.

Events

Networking

Due to the COVID-19 restrictions all events and conferences have been postponed or cancelled which is unfortunate as both of us were due to present at international conferences over the past few months and were really looking forward to them. The conferences have been pushed back to later in the year and next year. In the meantime, we have been establishing our relationships with PHN's, peak professional bodies and

others and are looking forward to being part of some great educational events in the coming year.

If you would like us to present at any of your events, please contact us on info@healthec.com.au or phone Marg on 0419939458.

Trainers wanted

Fracture management casting/splinting trainers required in all states and territories.

Are you a casting expert, do you have the skills to teach and assess a group of health professionals to apply and remove various casts and splints?

If yes, we would love to talk to you.



Sessional trainer course facilitator

Health Education Collaborative (HEC) and the Australian Orthopaedic Association (AOA) are looking for expressions of interest from health professionals suitably qualified and experienced in casting and fracture management for the position as sessional trainer/course facilitator for the **Fracture Management: immobilisation, splinting and casting course**.

As a trainer you will be delivering the course to groups of up to 12-14 participants from various health backgrounds including medical, nursing and allied health professionals.

Typically, the applicant will have a qualification in casting or equivalent or demonstrated background and sufficient experience to qualify as a sessional trainer course facilitator.

Referral by an AOA member is desirable.

Applicants must be proficient in:

- Use of various under casting materials
- POP and synthetic casting material
- Splinting using POP and synthetics
- Full cast application
- Limb positioning
- Modification and removal of casts
- Trouble shooting and management of complications of casts
- Knowledge of various fractures and their management



You must be currently working with both Plaster of Paris and synthetic casting materials are essential.

Mandatory splints and cast to be covered during a training session include:

- Basic and Universal splint
- Thumb spika
- Collies cast
- Scaphiod cast
- Above and below elbow
- Above and below knee

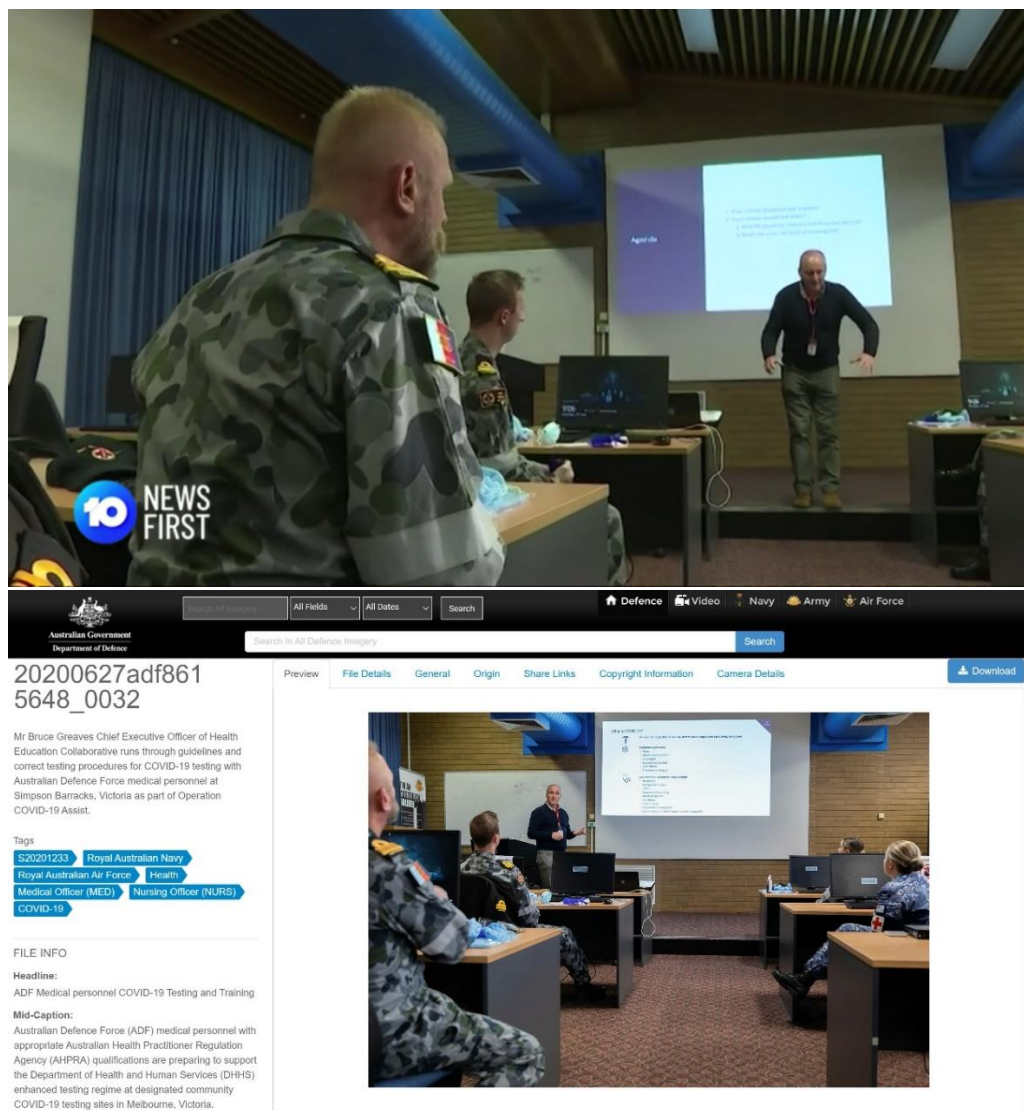
In addition, it is desirable that applicants be skilled in classroom facilitation and assessment.

Cert IV in Training and Assessment is also desirable but not essential at this point. Successful applicants will be provided with a facilitation guide and training to support their engagement in this role.

To submit an expression of interest or obtain further information, please contact Bruce from Health Education Collaborative on 0444 547356 or click [HERE](#) to enquire.

Did you see Bruce on the news over the weekend of the 27 and 28 June?

Bruce has been working with the Department of Health and Human Services (DHHS) Victoria to assist in the infection prevention training for Covid-19. Here he is training with the Australian Defence Force.



Next Issue: July 2020



Contact us:

Marg: 0419 939 458 or Bruce: 0444 547 036

Website: <http://www.healthec.com.au/>